

MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET
(FOR USE W/ FORM PTO-875)

SERIAL NO.

FILING DATE

107528176

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	2		↓		↓	↓
TOTAL DEP.	2	↔		↔		↔
TOTAL CLAIMS	4	████████		████████		████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
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TOTAL IND.			↓		↓	↓
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS		████████		████████		████████